

U.S. DEPARTMENT OF STATE

Application for Federal Employment

Social Security	v Number		La	st Name [F	ill in up to	the first 18 le	tters]								
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Experience Block	Paid Unpaid Unemployed Education Full-Time/Part-Time Full-Time Full-Time Full-Time Hours per week		Date From [mmddyy]			То	Starting Salary \$ If present experience, darken circle and leave "Date To" blank. Present			<u>ا</u> ٥'	Wk S Mo				per Hr Wk Mo
Employer's N	Employer's Name and Address [include ZIP Code, if known] If Federal employment, civilian or military, list series, grade or rank, and if promoted in this job, indicate the date of your last promotion. Supervisor's Name, Area Code and Telephone Number														
Describe you	ır duties and accomplishı	ments (include any know	vledge, skills,	and abilitie	es listed in	n the vacancy	announcem	ent that y	ou have	gained fi	rom th	is work	experi	ence).	
Experience Block	Type of Experience Paid Unpaid Unpaid Education	Full-Time/Part-Time Full-Time Part-Time Hours per week	Date From [То	\$ Starting \$ If present circle and blank.		ate To"	Ŏ,	Hr Wk Mo Yr	\$ To [mm			per Hr Wk Mo
	Name and Address [includes and Address and Address and accomplish		vledge, skills,	, and abiliti	es listed i	Supervis	I employmed in this job	, indicate	the date	of your I	ast pro	omotior er	1.		